

LETTERS *to the Editor*

Some Order from Chaos

TO THE EDITOR: I would like to compliment you on your recent, well written editorial entitled, "From 'Crisis' to Chaos to What?" [Calif Med 119:52-53, Nov 1973]. Any physician who has been engaged in the day-by-day care of medical diagnosis and treatment knows that the situation has indeed become more and more chaotic. The ultimate to that would be collapse with the physicians being incapable of handling the main business at hand, trying to get people well, and perhaps opt for complete salaried physicians in our hospitals. Of course this will not solve the problem at all. There is no way of financing and figuring costs of medical diagnosis and treatment without figuring the number of patients to be seen during a fixed period, the number of beds occupied, et cetera. This is how budgets are figured for all governmental hospitals. Waiting lists and control of patients will then become the order of the day. Unfortunately, the public and their elected representatives are completely naive about this.

The medical society could do something to eliminate some of the chaos and some of the excessive cost by forcing such simple things as unified billings and insurance processing, particularly with the use of the computer. This technology is already at hand and I understand there is one large group in the state that has forced such a system through. In other words, the statement with the diagnosis becomes the insurance form and every insurance carrier, be it public or private, uses it. The recent study by Dr. John Knowles shows that administrative costs in medical care have risen twice as fast as any other costs. It is obvious to anyone, whether in private or institutional practice, that private insurance carriers, Blue Cross, CPS, Medi-Cal, CHAMPUS, industrial accident carriers, Crippled Children's Services, have their own particular requirements for their own forms and methods of billing. To me this is an inexcusable waste and has resulted in an inordinate amount of paper and complexity leading to chaos. You don't have to have a graduate degree in economics to see the effect of this and

the geometric proliferation of administration on its concomitant high costs in the medical care system.

The insurance companies and the governmental agencies responsible as third party carriers are operating circa 1930. There is no reason for them not to issue something like a credit card to the patients who are covered. Such a system is being used now in the province of Quebec in Canada.

It would seem to me that the California Medical Association ought to ask the California State Legislature to appoint a commission to intensively study and conduct hearings on the chaos and the costs of administering medical care in 1973. Legislators and the public need education on what is really going on. I am certain that if the legislators had known of the enormous complexity, the vagaries, and the projected costs of the PSRO's, they would never have voted for them in the first place. The majority of the public and their elected representatives do not really know how they are the ones who are going to be controlled.

Your editorial pin-points the current state of affairs. If you have any influence at all on the CMA I think that you might encourage practical action now in attempting at least a partial solution to some of the chaos we are now in, by calling for the reform of insurance claim processing.

Thank you for this opportunity in writing and for your editorial.

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Editorial Note: The problem extends far beyond California. —MSMW

Poison Hemlock

TO THE EDITOR: In the case report [Costanza DJ, Hoversten VW: Accidental ingestion of water hemlock. Calif Med 119:78-82, Aug 1973] Doctors Costanza and Hoversten have attributed the poisoning in their two patients to *Cicuta virosa*. The photograph accompanying the article is unquestionably that of *Conium maculatum*, commonly known as Poison Hemlock. The discussion states that the children confused the hemlock with "wild anise" more commonly known as fennel. The growth characteristics of *Conium maculatum*